24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Black PAC	C C00609388
Check if X 24-hour report 48-hour report New report Amends report filed	i on Mam / Dad / Yayayay
Full Name of Payee Deliver Strategies, LLC	Date of Public Distribution/Dissemination
	10 24 2018
Mailing Address PO Box 100970	Amount
City State Zip Code	129888.52
Arlington VA 22210-3970	Transaction ID : VTDG0AARZY6 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Offic	e Sought: House District:
Nelson, Bill, , ,	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disb 2018	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City.	
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Galorida. 16a. 16 Balo	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	129888.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Funerality was	
(c) TOTAL Independent Expenditures	129888.52
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
Shropshire, Adrianne, R., , [Electronically Filed] Date	10 25 2018
Signature	